

DECLARATION/POWER OF ATTORNEY FOR PATENT APPLICATION

Docket No. 147-1

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled SELECTIVE PREVENTION OF UNDESIRE COMMUNICATIONS WITHIN A COMPUTER NETWORK, the specification of which is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

_____	_____	_____	Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefits under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

_____	_____
(Application Number)	(Filing Date)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

_____	_____	_____
(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Edward W. Callan, Attorney Registration No. 24,720

Address all telephone calls to Edward W. Callan at telephone number (858) 259-5533

Address all correspondence to Edward W. Callan, 3830 Valley Centre Drive, No. 705, PMB 452, San Diego, CA 92130

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of sole or first inventor (given name, family name) Jon Ryan Welcher

Inventor's Signature <u>Jon Ryan Welcher</u>	Date <u>12/20/00</u>
Residence <u>Encinitas, California</u>	Citizenship <u>U. S. A.</u>
Post Office Address <u>336 Sylvia Street, Encinitas, California 92024, U. S. A.</u>	

☒ Additional inventors are being named on separately numbered sheets attached hereto.

Variable	Mean	SD	Min	Max
Age	38.5	10.2	25	55
Gender	Male	Female		
Marital status	Married	Single		
Education	High school	College		
Occupation	Manager	Worker		
Income	\$30,000	\$40,000		
Health status	Good	Fair		
Exercise frequency	Weekly	Monthly		
Stress level	Low	High		
Sleep quality	Good	Poor		
Dietary habits	Healthy	Unhealthy		
Alcohol consumption	None	Occasional		
Tobacco use	Non-smoker	Smoker		
Family size	2	3		
Work hours	40	50		
Commuting time	30	45		
Living space	Small	Large		
Neighborhood safety	Safe	Unsafe		
Access to green spaces	Yes	No		
Proximity to schools	Close	Far		
Public transportation	Good	Poor		
Crime rate	Low	High		
Healthcare access	Good	Poor		
Community support	High	Low		
Local economy	Strong	Weak		
Environmental quality	Good	Poor		
Local government	Effective	Ineffective		
Local culture	Diverse	Homogeneous		
Local history	Rich	Poor		
Local infrastructure	Good	Poor		
Local services	Good	Poor		
Local amenities	Good	Poor		
Local safety	Good	Poor		
Local environment	Good	Poor		
Local economy	Good	Poor		
Local government	Good	Poor		
Local culture	Good	Poor		
Local history	Good	Poor		
Local infrastructure	Good	Poor		
Local services	Good	Poor		
Local amenities	Good	Poor		
Local safety	Good	Poor		
Local environment	Good	Poor		
Local economy	Good	Poor		
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Local history	Good	Poor		
Local infrastructure	Good	Poor		
Local services	Good			